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PTO/SB/21 (05-03)

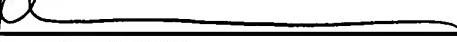
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/685,336
	Filing Date	October 14, 2003
	First Named Inventor	Robert D. Keefover et al.
	Art Unit	2858
	Examiner Name	To Be Assigned
Total Number of Pages in This Submission	Attorney Docket Number	
	DKT 03016 (BWI-00087)	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <div style="margin-left: 20px;"><input type="checkbox"/> Fee Attached</div> <input type="checkbox"/> Amendment/Reply <div style="margin-left: 20px;"><input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)</div> <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <div style="margin-left: 20px;"><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53</div>	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below): <div style="margin-left: 20px;">Return Receipt Postcard</div>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Remarks</div> <div style="margin-bottom: 10px;"> Applicant believes no fee to be due for the attached filing, however, should additional fees be due in order to prevent the abandonment of this application, please consider this as authorization to charge Deposit Account No. 501612 (Warn, Hoffmann, Miller & LaLone, P.C.) for any such fees due. A duplicate copy of this document is enclosed for this purpose. </div>		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Warn, Hoffmann, Miller & LaLone, P.C. Philip R. Warn - Reg No. 32775	
Signature		
Date	December 6, 2004	

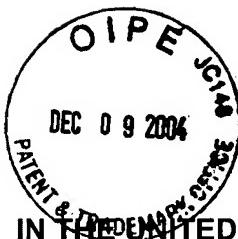
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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/685,336

Filing Date: October 14, 2003

Applicant: Robert D. Keefover et al.

Group Art Unit: 2858

Examiner: To Be Assigned

Title: SINGLE SENSING MULTIPLE OUTPUT SYSTEM

Attorney Docket: DKT 03016 (BWI-00087)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

STATUS LETTER

Sir:

Please advise when we may expect an Office Action in the above-identified patent application, which was filed on October 14, 2003.

Respectfully submitted,

WARN, HOFFMANN, MILLER & LALONE, P.C.
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Dated: December 6, 2004

PRW:jmz:slm